

# Work Order ID 101142

\*101142\*

Page 1

May 2, 2013 7:06:08 AM

Item ID: D4009

Accept

\*N9000040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Ground Strap

Start Date: 5/02/13 Start Qty: 100.00

\*100\*

Cust Item ID:

Required Date: 5/08/13 Req'd Qty: 100.00

\*100\*

Customer:

Reference:

Approvals: Process Plan: *CL*

Date: 13/05/02 Tooling:

Date:

Run Start \*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop \*NR2\*

Operation Description	Setup Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D4009

A-PRELIM

100

0.00

\*100\*

Purchasing

Memo

0.00

Purchasing

Issue P/O: 19759

Purchase part as per Dwg D4009

Part #: QQB575R36T250

Possible Supplier: C.O.R.E. AVIATION

Material release note required

*CL 13/05/02 (100)*

110

Receive & Inspect for Damage & Mat'l Certs

0.00

\*110\*

Packaging

Memo

0.00

Packaging

*100 SP 13-5-23*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 101142**

May 2, 2013 7:06:08 AM

**\*101142\***

Page 2

Item ID: D4009

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Ground Strap

Start Date: 5/02/13 Start Qty: 100.00

**\*100\***

Cust Item ID:

Required Date: 5/08/13 Req'd Qty: 100.00

**\*100\***

Customer:

Reference:

Approvals: Process Plan: Date:

Tooling: Date:

Run Start **\*NR1\***

QC: Date:

SPC (Y/N): Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run HoursTool ID Tool # Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

130

Identify as per dwg &amp; Stock Location:

0.00

**\*130\***

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

100

4/3/0/28 (100)

13/5/28

MCS 13-05-28

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
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Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

# Picklist Print

May 2, 2013 7:06:08 AM

Page 1

Work Order ID: 101142

Parent Item: D4009

Parent Item Name: Ground Strap

Start Date: 5/02/13

Required Date: 5/08/13

Start Qty: 100.00

Required Qty: 100.00

Comments: IPP rev A 09.12.23 new Issue Prelim EC verified by: DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
QQB575R36T250 Ground Strap		Purchased	No			110	f	0.0000	1	100	100	SP13-5-23	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

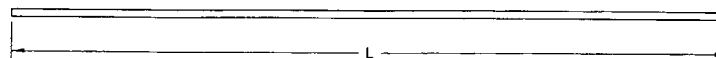
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Equip/Tooling											
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FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

DART AEROSPACE PART NUMBER	JOHN CAMERON AVIATION PART NUMBER
D4009-3	REF JCA-M47-4-01
D4009-5	REF JCA-M47-4-01

## SPECIFICATION CONTROL DRAWING



DART PART NUMBER	LENGTH "L"
D4009-3	1.5
D4009-5	13.5

### D4009-X GROUND STRAP

CL 13/05/02

RELEASED  
2010-05-05  
MP

#### NOTES:

- 1) MATERIAL: MADE FROM AVIALL P/N 1171 (OR SEA-171) OR C.O.R.E. AVIATION P/N QQ8575R36T250
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A

DESIGN		<b>DART AEROSPACE LTD</b>
DRAWN		HAWKESBURY, ONTARIO, CANADA
CHECKED		DRAWING NO. REV. A
MFG. APPR.		D4009 SHEET 3 OF 5
APPROVED		TITLE SCALE
DE APPR.		GROUND STRAP NTS
DATE	10.02.05	COPYRIGHT © 2010 BY DART AEROSPACE LTD

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# C.O.R.E. Aviation Services, Inc.

16305 E. TWIN ACRES DRIVE

GILBERT, AZ 85298

USA

Ph: 480-497-6136 Fax: 480-497-3568

EMail: sales@coreaviation.com

DUPLICATE

## Invoice

Invoice : CA130517-6

Date : 05/17/2013

No. Items: 2

Page : 1 of 1

To:  
Dart Aerospace Ltd.  
1270 Aberdeen St.  
Hawkesbury, ON K6A 1K7  
Canada

Ship To:  
Dart Aerospace Ltd.  
Main Finished Goods Location  
1270 Aberdeen St.  
Hawkesbury, ON K6A 1K7  
Canada

Sales Order : 19759

AWB : 799795085231

Resale :

Your Order# : 19759

Customer# : DALD

Buyer :

Order Date : 05/02/2013

Terms : N 10

Contact : 613-632-9577

Ship Date : 05/17/2013

Sales Person: KAIZER HUSEIN

Weight :

Ship Via : FEDEX

FOB : GILBERT, AZ

No. Boxes :

Dimensions :

Item	Part Number/Description	Shipped	BackOrd	CD	Unit Price	Total Amt
1	MS20601AD4W10 BLIND RIVET ✓	100	0	NS	\$5.00 EA	\$500.00
2	QQB575R36T250 BRAID,WIRE ✓ NSN: 6145-00-728-4026	100	0	NS	\$3.90 FT	\$390.00

SP13-5-23

MA

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### TERMS AND CONDITIONS OF SALE

MATERIALS ON THIS ORDER CONFORM TO SPECIFICATIONS AS LISTED ON YOUR PO/RO.

MATERIAL IS SUBJECT TO YOUR INSPECTION

OUR TERMS ARE AS PER OUR MUTUAL LETTERS OF AGREEMENT.

OVERDUE INVOICES WILL BE SUBJECT TO 1.5% INTEREST ON OVERDUE AMOUNTS.

NO RETURN OR REFUNDS AFTER 10 DAYS FROM INVOICE DATE.

DAMAGE OR SHORTAGE CLAIMS MUST BE MADE WITHIN 10 DAYS OF INVOICE DATE.

NO RETURNS ALLOWED WITHOUT PRIOR APPROVAL. RETURNED GOODS COULD BE SUBJECT TO A RESTOCK CHARGE.

\*\*\*\*\*

COUNTRY OF ORIGIN OF GOODS : USA

TYPE OF GOODS : AIRCRAFT PARTS

HARMONIZED CODE : 8803-20-0050

\*\*\*\*\*

Sub Total : \$890.00

Tax Total :

S + H : \$0.00

Balance : \$890.00





# C.O.R.E. Aviation Services, Inc.

16305 E. TWIN ACRES DRIVE

GILBERT, AZ 85298

USA

Ph: 480-497-6136 Fax: 480-497-3568

E-Mail: sales@coreaviation.com

## Packing List

Ship Doc: CA130517-6

Printed : 05/17/2013

No. Items: 2

Page : 1 of 1

### Bill To:

Dart Aerospace Ltd.  
1270 Aberdeen St.  
Hawkesbury, ON K6A 1K7  
Canada

### Ship To:

Dart Aerospace Ltd.  
Main Finished Goods Location  
1270 Aberdeen St.  
Hawkesbury, ON K6A 1K7  
Canada

Sales Order : 19759

Order Date : 05/02/2013

Ship Date : 05/17/2013

Ship Via : FEDEX

Ship Account 15179324-0

AWB

: 799795085231

Customer# : DALD

Terms : N 10

Sales Person: KAIZER HUSEIN

FOB : GILBERT, AZ

Resale :

Buyer :

Contact : 613-632-9577

Weight :

No. Boxes :

Dimensions :

Item	Part Number/Description	CD	Location	UM	Ord	B/O	Shipped	Cust. PO#
1	MS20601AD4W10 BLIND RIVET	NS	HC202	EA	100	0	100	19759
2	QQB575R36T250 BRAID,WIRE NSN:6145-00-728-4026	NS	HC202	FT	100	0	100	19759

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#####

COUNTRY OF ORIGIN OF GOODS : USA

TYPE OF GOODS : AIRCRAFT PARTS

HARMONIZED CODE : 8803-20-0050

#####

# CERTIFICATE OF CONFORMANCE

## C.O.R.E. Aviation Services, Inc.

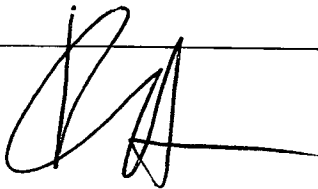
16305 E. TWIN ACRES DRIVE, GILBERT, AZ 85298, USA

Phone: 480-497-6136 Fax: 480-497-3568 FAA Sta. #: Web:

Invoice : CA130517-6  
Date : 05/17/2013  
PO : 19759  
Issued By : KAIZER HUSEIN  
Page : 1 of 1

THIS IS TO CERTIFY THAT ALL GOODS ON C.O.R.E. INVOICE WERE SHIPPED IN ACCORDANCE WITH THE PART SPECIFICATIONS ON CUSTOMERS PO & TO THE BEST OF OUR KNOWLEDGE AND BELIEF, MEET THOSE STANDARDS.  
ITEM(S) WERE DETERMINED TO BE IN STATED CONDITION BY VISUAL CONDITION AND OR IN ACCORDANCE WITH RECEIVING RECORDS.  
ALL DETAILED RECORDS ARE KEPT ON FILE AT C.O.R.E. AVIATION SERVICES FOR ANY FUTURE CUSTOMER INSPECTION.

Item	Part Number/Description		Shipped	CD
1	MS20601AD4W10	BLIND RIVET	100	NS
2	QQB575R36T250	BRAID, WIRE	100	NS



KAIZER HUSEIN



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO19759

Purchase Order Date 5/02/13

PO Print Date 5/02/13

Page Number 1 of 1

Order From :

VU-COR001

C.O.R.E. AVIATION SERVICES  
16305 E. TWIN ACRES DRIVE  
GILBERT, AZ 85297  
US

Contact Name

Vendor Phone 480 497 6136

Vendor Fax 480 497 3568

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 10

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FXED**  
61305162

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MS20601-AD4W10	RIVET	5/06/13 Yes	✓ 100.00 Each	FedEx PI collect	\$5.0000	✓ \$500.00
2	QQB575R36T250	Ground Strap	5/06/13 Yes	✓ 100.00 f	FedEx PI collect	\$3.9000	✓ \$390.00

Special Inst: AS PER DWG D4009 REV. A  
B101142

PO Total:

\$890.00

CERTIFICATE OF CONFORMITY  
REQ'D UPON DELIVERY

SP13523

Change Nbr: 1

Change Date: 5/02/13

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO